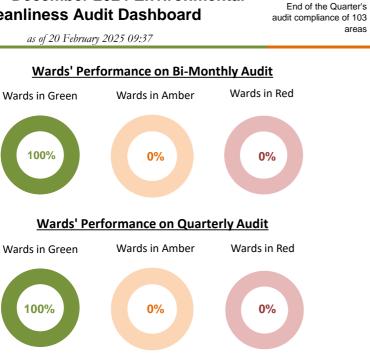
October - December 2024 Environmental Cleanliness Audit Dashboard



Wards' Performance on 6-Monthly Audit



Wards' Performance on Managerial Audit



Bi-Monthly Audit Compliance of 39 areas

Managerial audit's

December 2024 of 229

compliance as of

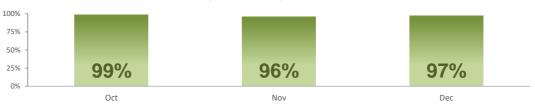
areas

R10/

>=91%

<=74%

>=75% and <=90%



Directorates' Bi-Monthly Environmental Cleanliness Audits Average Scores

57%

3rd month of the 6-

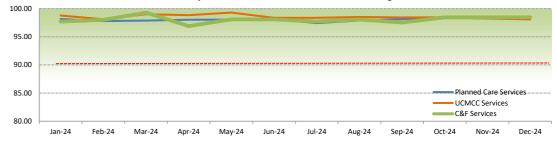
compliance of 72 areas

Monthly's audit

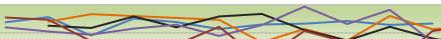
95%

100.00

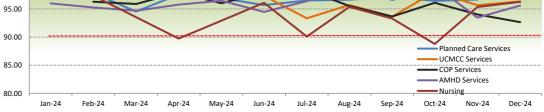
areas



100.00 95.00 90.00 anned Care Services UCMCC Services COP Services 85.00 AMHD Services Nursing C&F Services 80.00 Jan-24 Feb-24 Mar-24 Apr-24 May-24 Jun-24 Jul-24 Aug-24 Sep-24 Oct-24 Nov-24 Dec-24



Directorates' 6-Monthly Environmental Cleanliness Audits Average Scores



Directorates' Quarterly Environmental Cleanliness Audits Average Scores



List of Areas Not Compliant with ECA Standards

October - December 2024

Bi-Monthly:		Exception Report
October		
Area/s in red score:	None	N/A
Area/s in amber score:	ALT-Theatre 6 (E=88%)	Awaiting allocation of jobs with estates.
		Re reporting of jobs awaiting, highlighted on the system again.
	ALT-Theatres Recovery (E=87%)	Ongoing work required to replace flooring reported multiple time sot estates
		Reported to estates
Partial-compliant	ALT-DESU Theatre 16	No report submitted
1 out of 2 audits completed		
and reported		
November		
Area/s in red score:	None	N/A
Area/s in amber score:	ALT-DESU Theatre 1 (C=81%)	Theatre was audited dirty at the end of a list. Changes in auditing timetable, unable to book
		audit for outside of operating times.
		Emailed S.S manager to highlight this issue. Directed to booking audits up until 10pm. Whe
		i requested this at booking i was informed the latest an audit could be booked is 5pm. DESL
		theatre cleaners finish at 10pm. Nursing staff not on duty after 8pm in desu. This was taken
		to manager who is no longer in post.
No audit completed/reported:		No report submitted
Partial-compliant	ALT-Theatre 5	No report submitted
1 out of 2 audits completed	ALT-Sperrin Suite	No report submitted
and reported:		
December		
Area/s in red score:	None	
Area/s in amber score:	ALT-DESU Theatre 4 (C=87%)	Support services changed auditing times. Therefore we are only able to audit theatres
		durring their operational hours. 5pm was the latest audit time we could book. Theatre was
		audited dirty.
		Reported to lead nurse when unable to arrange any further dates or times for the month.
		This will happen frequently.
	ALT-Theatre Recovery (E=87%)	Ongoing Estates issues. Reported to Estates.
No audit completed/reported:		No report submitted
Partial-compliant	ALT-Theatre 3	No report submitted
1 out of 2 audits completed	ALT-Ward 48	No report submitted
and reported	OHPCC-Theatres	No report submitted
Quarterly:		
Area/s in red score:	None	

Area/s in amber score:	ALT-ACU (C=88%, E=86%)	Commodes dirty underneath; linen trollies dirty; overall appearance of the unit - untidy, cluttered; Suction and nebuliser machines dusty; shower chairs dirty; Bins rusted New bins ordered for unit; Cleaning scheledule being revised for staff on unit for daily cleans of patient equipment and commodes; staff informed as a whole regarding the cleanliness of the unit and areas for improvement; Checks will be completed to monitor for improvement. Windows, sills and frames dusty in dirty in rooms ans bays. Chairs and stools dirty and dusty. Dirty floor at nurses station. High low dust in all bays, rooms and corridors. Shower room dirty. Taps in room D dirty. Spoke with the cleaning supervisor to address issues. Supervisor spoke with all staff. I will carry out checks of the unit and address any issues with the cleanliness.
	ALT-Hydrotherapy (P=84%, E=88%)	Hand sanitiser needs replaced - Eoin Kenny (physiotherapy assistant) to contact estates to replace same; notes stroed in pool area - now in filing cabinet; no dani stations - Eoin Kenny to order Dani station and contact estates to put up; all signs should be laminated - now sorted; hoist not charged - protocol for hoist to be charged at all timews when not in use; shower curtain needs replaced - Eoin Kenny to order and replace same in Male, Female and staff changing areas; Equipment store - untidy - Aidan Rooney to ensure this area is kept tidy; bin broken - Eoin Kenny contact waste management for disposal.
	ALT-Ward 3 (C=89%)	Dirty toilet roll holders nad brushes. Dirty on the hardfloor of visitor toilet and in single room it was dirty on the floor. All dirty equipment was replaced. Cleaning ongoing. Ongoing observation. Estates services made aware.
	Omagh HC Treatment Room (C=90%)	

Rapid Response Derry (P=88%)	G0044 Sluice Room - Gloves - No stock of gloves available, gloves no expiry date, need
	disposed; Patient equipment dusty - PICC boxes x2 dusty; Tables/worktops/Cupboards
	untidy - high storage requires tidy. Sluice Room - Patient equipment damaged - scales no
	asset number, no calibration date. Treatment Area - chairs/stools torn/ripped/exposed - tear
	on patient chair near base; fans external casing dirty; Hand Hygiene - staff not adhering to
	hand hygiene procedure, fail x 2, staff members had gel nails, 7 steps not followed x 1,
	permanent bracelet worn x 1; Notes/Drug/Dressing/Resuscitation trollies dirty - clinical
	trolleys need internal clean, crack to white surface, needs replaced; Patient equipment used
	for near patient testing - grime build-up at edges, BP cuff require clean; Sharps boxes
	procedure not adhered to - no temp closure; Stored patient equipment dirty - Drip stand
	bases require clean; Tables/worktops/cupboards untidy - filing cabinet sticky residue require
	removal.
	The following staff have been informed: Interim Assistant Director PCOP Paula Devine;
	5
	Interim Head of Community Nursing (Southern Sector) Marianne Walsh and Rapid
	Response Nursing Derry Tina McCauley.

	T&F-Lime (P=86%)	
No audit completed/reported:	ALT-Pharmacy Dispensary Area	
	ALT-Ward 42	Was booked for 11th of decemeber but was not abel to take place rescheduled for 27th Jar
		2025
	Great James St Health Centre Treatme	As per Domestic supervisor the audit was completed however the MICAD reporting system
		is down and therefor the audit cannot be uplaoded to the Dashboard.
		Audit has been completed, awaiting IT support to fix issue with MICAD.
	T&F-Rowan Villa	No report submitted
S-Monthly:		
Area/s in red score:	None	
Area/s in amber score:	Foyleville Day Centre (P=78%, E=84%)	Some staff were found to have fake nails on; Another staff member was wearing
		inapporopriate footwear; COSHH cupboard was not secured.
		Staff and Support services met and meeting took place regarding non complinace with
		policy.
		Staff reminded to follow IP&C guidance. Manager to complete hand hygiene audits twice
		monthly and do a daily walk around to ensure all areas that should be locked are lockec,
	Irvinestown HC Podiatry (C=81%, E=84	Window panes were reported to Estates but not replaced as yet. Seat not broken, just design
		of chair has edges raised.
		Awaiting estates update re windows.
	OHPCC-Womens and Family Health (F	No report submitted
	Rectory Field Residential Home (P=839	No report submitted

	SWAH-Podiatry (E=87%)	Still awaiting estates to repair couches with torn covering - it has been assessed by estates but not actioned.
		Estates to update on repair of couches in 2 rooms in Podiatry in SWAH.
	William Street Residential Home (E=88	⁸ During managerial audit there was ongoing work some of equipments need to be replaced/ condemned.
		New equipment ordered and old equipmen disposed off. Carry out checks more often
Managerial:		
Area/s in red score:	Lakeview Support Area (P=48%)	No report submitted
		 There was a number of people using and accessing the room, however there was no accountability for cleaning or tidying the room or disposing of out of date products from the room. Community Nurse Manager has met with the team, discussed the audit and informed all nurses that it is their responsibility after use of the room, to ensure it is clean and tidy. A deep clean and stock control will be completed every Wednesday by community nurse. Weekly review by community nurse manager. Random unschedule checks to be completed by nurse manager also. Importance of having a shcedule in place with regards cleaning of communal rooms to
		ensure accountability is placed on all individuals.
Area/s in amber score:	Alcohol & Drugs, Woodlea House (P=8	COSHH folder not available; safety data sheet for chlorcide missing; some stock out of date eg gloves; no temp on staff food fridge; no washable floor in additional clinical room cosh file displayed - actioned; eye protection - actioned; safety data sheet displayed alongside chloricide - actoned; staff fridge thermometer actioned; minor capital works log for washable flooring - to be done; sharps collection - actioned; fire door - clinical room & signage logged estates; replace seating with wipeable to be actioned
	ALT-Endoscopy (P=88%)	Dust on resusitation trolley, alcohol foam out of date, chloricide bottle not dated, BP monitor damaged, unwashable cloth used as drape, rusted binx1, COSSH cupboard not locked, oxygen in a store with no signage, kettle and microwave needing cleaned. All staff made aware of deviation and reminded to lock cupboards at all times. Staff reminded that oxygen should not be in a store with no signage, to place in oxygen store afte use. new kettle and microwave ordered, x1 bin ordered. BP monitor added to wishlist to replace. Dust removed from all areas. all out of date alcohol foam removed from unit.
	ALT-Orthoptic Room (C=85%, E=85%)	No report submitted

ALT-Podiatry (P=87%)	Electricians put in new lights - failed on ceiling tiles; Floors, bins and radiators dirty -; Ripped chair
	Estates job request put in for ceiling tiles; New chair ordered from eprocurement.; Support
	services contacted re cleaning of room on a regular basis.
	When new ceiling lights put in, would have been beneficial to replace old ones at this time.
ALT-Renal Unit (P=89%)	Failed audit on Nursing elements.
	All failed elements of the audit will be actioned either through estates department where repairs are required. The floors in the renal unit are in need of being replaced this has been an ongoing issue. We had some repairs carried out recently. All the bins had been recently replaced in March in the unit and they are already rusting this is ongoing and are needing replaced often. Any new equipment will be replaced for example new CosHH cupboard. As a unit we need to be more mindful of the building and report any repairs or damage so further audit failures can be avoided.
Berryburn Centre (P=85%)	No report submitted
Bridgeview House Child Developm	nent (No report submitted
Cityside Recovery team, Slievemo	re HcNo report submitted

Dungiven Health Centre (P=87%)	G0006 Store - Alcohol gel, wipes & hibiscrub - No alcohol gel available, out of date hand sanitizer needs removed; Overall appearance - Cluttered, pads stored on floor needs removed, hoist sling needs removed; Overall appearance - Untidy, items stored too high,
	stored on floor overstock of dressings and syringes posiflush overstock x600, overstock of
	catheter packs, overstock of bladder washout, overstock of cotton balls; stored patient
	equipment - untidy, enemias- medication should be locked away, iv fluids stored?; G0012 Clinic Room 2 - Hand hygiene, staff not adhering to hand hygiene procedure, stoma nurse -
	gel nails and ring, failed 7 step hand hygiene; G0013 Clinic Room 1 - Chairs/stools -
	torn/ripped/exposed, all chairs need to be wipeable; hand wash sinks/taps untidy, cup at
	hand wash sink needs removed and sink to only be used for hand washing; Notice
	Boards/Posters/Information stands - hung incorrectly, hand washing poster needed for
	handwash sink, signs not laminated; Patient equipment available for use - damaged, out of date items in stoma nurse cupboard needs removed, dirty - stoma nurse drawer and
	cupboard needs cleaned; Tables/worktops/cupboards - cluttered, gynea cupboard - gels and
	items out of date, untidy - out of date coffee and soup needs removed; G0016 Corridor -
	Chairs/stools - torn/ripped/exposed, chairs stacked too high in corner; G0022 Kitchen - Staff
	Fridges, Microwave, Dishwasher - dusty, geyser - heavy dust evident on top; Damaged -
	Microwave needs to be out of use bad rust, toaster dirty, plastic tray underneath needs removed; Out of date Food - out of date butter and eggs in fridge need removed;
	Tables/worktops/Cupboards untidy - cupboards needs cleaned; G0023 Male Toilet - Waste
	bins/receptacles damaged - bin not closing without push; G0024 Female Toilet - Waste
	bin/receptacles damaged - bin not closing without a push; G0025 Cleaners Store - Face/Eye
	Protection - No face or eye protection available, out of date masks in sluice; Notice
	Boards/Posters/ Information stands - not all signs laminated
	The following staff have been informed: Interim Assistant Director PCOP Paula Devine; Interim Head of Service Community Nursing (Northern Sector) Joanne Torrens and
	Community Nursing Services Manager Karen Cutliffe.

Limavady Recovery Team (P=83%)	Notice boards not wipeable; waste bins missing; no sticker on top of bins; high level storage cupboards cluttered; tape on handwashing poster; bin rusty; door unlocked with cleaning products; hand hygeine waiting room; posters need lamintaed; sharp box overfilled; blue
	face masks expired; Actichlor wrong poster; alcohol gel expired; empty boxes fire hazard; small rip in chair in treatment room; Chairs in staff room not washable
	notice boards are to be taken down wipeable boards ordered; waste bins replaced; Stickers have been put on top of bins; high level storage has been rearranged; cuboards decluttered tape removed from handwashing poster; rusty bin replaced; cleaner informed of unlocked cleaning cuboard and it is now locked; hand hygiene gels replaced in waiting room; posters laminted; sharp boxes changed when 3/4 full; out of date blue face masks removed; New actichor poster sourced; empty boxes removed from cleaners store; chairs in staff room to be replaced with washable awaiting approval for same.; awaiitng approval for chair in treatment room
	Ensuring regular audits of the environment in house, including regularly used stock and equipment, the cleanliness of the environment and storage solutions.

Lisnamallard Industries, Omagh (E=87	No report submitted	
Melrose Day Centre (E=86%)	No report submitted	
Newtownstewart Day Centre (C=82%)	No report submitted	
OHPCC-Adult's AHP (E=87%)	No report submitted	

D 00 44 07 4 Deep Deeper Outeine quandus contacion Dispediaitus Walls need consisted
D.02.11.07.1 Prep Room - Curtains overdue replacing. Ripped pillow. Walls need repainted. Disposable B/P cuff attached to vital signs monitor. Cluttered windowsill. Bedpan inserts sitting out. Interview Room- D.02.11.05 - Vital signs monitor - no clinell sticker. Walls - paint chipped and need repaired. D02.11.06 - Examination Room - Clinical equipment no Clinell
tape. Patient trolley dusty. Room appears cluttered. Videne Surgical Scrub expired.
Examination hand headset heavy dust. Wellch Allyn monitor dusty. D.02.11.78 Male
Recovery - Walls need touch up of paint. Linen stored on a chair. Bottle of Chloricide left
unattended. General comment - lack of Clinel labels throughout. Silver trolley dusty with
white residue. D.02.11.96 - Toilet - tiolet brush needs replaced. D.02.11.93 Staff Base - Des edging chipped. Boxes on the floor D.02.11.15.1 Female Change area - glass panelling
door needs cleaned. Vital obs machine dusty - no clinelle label. Silver trolley dusty and
overloaded. D.02.11.18.1 - W.C Toilet backrest needs repaired. Toilet brush holder
stained. Hard floor needs washed. D.02.11.19.1 Assisted Change area - Pillow ripped. Hand
Sanitiser empty. D.02.11.20.1 Skirting needs resealed. Ceiling tile loose. Hand sanitiser
empty. 2x clipboards dusty. Nurse base - Cannualtion posters need updated. Strip ceiling light needs checked. D.02.11.09 - Male Change - Ceiling light bulb out. Ripped pillow.
Cluttered window sill. D.02.11.22.1 Ceiling tile needs fixed. Blue tac needs removed. Glass
panel in door dirty. Obs machine dusty and no Clinel sticker. Clipboards - clip dusty.
D.02.11.32 - Endoscopy Room 20 - Dust on trollies. Personal Magnets on CD cupboard.
Dust on equipment. PC and keyboard dusty. Sharps boxes - no temporary closures. Walls
and skirting - paintwork chipped. Resuscitation trolley - seal broken and dusty.
D.02.11.07.1 Prep Room - Curtains overdue replacing curtains have been replaced and dated. Ripped pillow - replaced with a new pillow. Walls need repainted - Estates contacted
job number 1634334. Disposable B/P cuff attached to vital signs monitor disposable cuff
disposed of and reusable cuff attached. Cluttered windowsill - window sill cleared of clutter.
Bedpan inserts sitting out - bedpan inserts disposed of. Interview Room- D.02.11.05 - Vital
signs monitor - no clinell sticker -Clinell sticker in date applied. Walls - paint chipped and
need repaired. Reported to Estates with job number 1634331. D02.11.06 - Examination
Room - Clinical equipment no Clinell tape - clinical equipment has now got Clinell tape applied. Patient trolley dusty trolley cleaned with disinfectant and clinell tape applied. Room
appears cluttered - Room tidied and decluttered. Videne Surgical Scrub expired -new bottle
of Vidine scrub opened. Examination hand headset heavy dust cleaned and clinell tape
No report submitted
No report submitted
Cleaner off on sick leave at the time and no agency cover; Rosebud identified for
refurbishement and business case to be progressed.
Requisiton has been raised for a replacement and have went out for recruitement; Estates notified

RV-Physiotherapy (P=80%)	 alcohol wipes out of date; 2.cluttered area; 3. damaged blinds; 4. signs not laminated alcohol wipes disposed; 2. boxes removed/ decluttered; 3. reported and new blinds ordered; 4. all signs now laminated; report shared with Principal Physiotherapist and suppor staff completed duties above with all clinical staff aware of requirements.
Shantallow Health Centre (C=87%	P=€ G0066 - Clinic Room: Stool rust, require replace, office chair needs replaced, washable required. Dressing trolley dust and items stored out date. Posters - Signs not laminated. Patient equipment - Changing mat dirty, weigh scales dusty, syringes out date, cotton wool left open exposed. Window curtains/screens - No date on privacy curtain. G0071 - Family Interview Room: Exam couch dusty, pillow & liner torn, new pillow and liner required. Waste bin – rusty/damaged. Window curtains/screens - Privacy screen dusty and torn, require replaced, no date on curtains. ??2 - Main Reception: Chairs/Stools - torn/ripped/exposed. 01007 - Surgery 1: Chairs/Stools - torn/ripped/exposed. Staff not adhering to hand hygiene, SALT fail, watch worn and incorrect sequence x 1. Noticeboards/Posters - Signs not laminated. G0030 - Store: Detachable Bedrails, mattresses, examination couches, pillow - Cot dust G0030 - clinic room 1. Fans External Casing – dirty. Notes / Drug / Dressing / Resuscitation trollies – dusty. Notice Boards/Posters/Information stands – signs not laminated. Patient equipment dusty. PC and keyboards and phone – dusty. G0032 - Common Room: Staff room - microwave needs cleaned. Also kettle requires cleaning. Hot water geezer requires PAT. G0040 - Clinical Toilet: Posters – signs not laminated. Walls/skirting - Recommend white rock to box in piping, (boxed in with wood.). G0054 - Female Toilet: Waste bin – rusty/damaged. G0066 - Clinic Room: Low surfaces dusty. Slinks - Cobwebs underside sink. Waste bin – dirty. G0030 - Store: Surfaces dusty. G0030 - Store: Surfaces dusty. G0030 - Store: Surfaces dusty. G0030 - Store: Surfaces - High levels of dust, especially curtain rail. Waste bin – dusty. G0030 midwife area this is clinical room. G0032 - Common Room: Soap dispenser / towels – dirty, out of supply. Room G0009 staff canteen. G0040 - Clinical Toilet: Surfaces – dusty. G0030 – Store: Surfaces - High levels of dust, especially curtain rail. Waste bin – dusty. G0030 midwife area this is clinical room. G0032 -

SWAH-Cardiac Investigations (P=86%) Service demands far exceed our current capacity, so standards fell temporarily below acceptable standard due to work load. Some of these rooms are used by a range of professionals i.e. respiratory nurse specialists, consultants, Clinical Physiology staff etc therefore difficult to ensure cleaning standards are met. Email will be sent to all staff groups to adress the common themes which resulted in this low
	score i.e. dust, no clinell sticker, securely store confidential information, drugs and keys, declutter rooms, label bins correctly, remove broken equipment, ensure all rooms are fully stocked, store store correctly etc. All jobs will be entered onto estates e.g. paint walls, fix tag toilet seat.
	All staff are responsible for cleanig the rooms they use, and toensure these rooms are fully stocked and ready for use after them.
SWAH-Ward 1 (P=85%)	Dust on trollies; Notice boards posters not laminated; Curtains expired; Bins in sluices rusted; PC and cupboards dusty; Drip stands dusty; Blood on packet of inco wipes Housekeeper currently on LTS; staff allocated to ensure weekly/daily schedule adhered to; Curtains replaced; Cleans carried out to areas hilighted;
Woodview Assessment Clinic (P=86%	, No report submitted